

**APPLICATION DATA SHEET**  
(Inventor(s) With Representation)

**Inventor Information**

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Postal Address Line One::	3605 Dorchester
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City::	Michigan City
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Inventor Two, Given Name::  
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Inventor Three, Given Name::  
Family Name::  
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Postal or Zip Code::  
Citizenship Country::

**Correspondence Information**

Correspondence Customer Number::	32116
Name Line One::	Wood, Phillips, Katz, Clark & Mortimer
Address Line One::	Citicorp Center, Suite 3800
Address Line Two::	500 West Madison Street
City::	Chicago
State or Province::	Illinois
Postal Or Zip Code::	60661-2511
Telephone::	312-876-1800
Facsimile::	312-876-2020

### **Application Information**

Title Line One::	WHEELCHAIR AND LEG
Title Line Two::	SUPPORT ACCESSORY
Total Drawing Sheets::	5
Formal Drawings?	No
Application Type::	Utility
Docket Number::	10098P0010US

### **Representative Information**

Registration Number One::	29,141
Registration Number Two::	30,091
Registration Number Three::	
Registration Number Four::	

### **Continuity Information**

This application is a::  
>Application One::  
Filing Date::

which is a::  
>>Application Two::  
Filing Date::

which is a::  
>>>Application Three::  
Filing Date::

### **Prior Foreign Applications**

Foreign Application One::  
Filing Date::  
Country::  
Priority Claimed::